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Standards and Methods of Assuring High Quality of Care

18. Hospice Services

- Admission Criteria. To be eligible for hospice Α. coverage, the recipient must be "terminally ill", defined as having a life expectancy of six months or less, and elect to receive hospice services rather than active treatment for the illness. Both the attending physician (if the individual has an attending physician) and the hospice medical director must certify the life expectancy.
- Authorization for hospice В. Utilization review. services requires an initial preauthorization and physician certification of life expectancy. Utilization review will be conducted to determine if services were provided by the appropriate provider and to ensure that the services provided to Medicaid recipients are medically necessary and appropriate. Services not specifically documented in the patient's medical records as having been rendered shall be deemed not to have been rendered and no coverage shall be provided.
- services are a medically directed, C. Hospice interdisciplinary program of palliative services for terminally ill people and their families, emphasizing pain and symptom control. following are core hospice services and must be provided directly by hospice employees.
 - Nursing Care: Nursing care must be provided 1. by a registered nurse or by a licensed practical nurse under the supervision of a graduate of an approved school of professional nursing and who is licensed as a registered nurse.
 - Medical Social Services: Medical social services must be provided by a social worker who has at least a bachelor's degree from a school accredited or approved by the Council on Social Work Education, and who is working under the direction of a physician.

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Standards and Methods of Assuring High Quality of Care

18. <u>Hospice Services</u>

- Α. Admission Criteria. To be eligible for hospice coverage, the recipient must be "terminally ill", defined as having a life expectancy of six months or less, and elect to receive hospice services rather than active treatment for the illness. Both the attending physician (if the individual has an attending physician) and the hospice medical director must certify the life expectancy.
- В. Utilization review. Authorization for hospice services requires an initial preauthorization and physician certification of life expectancy. Utilization review will be conducted to determine if services were provided by the appropriate provider and to ensure that the services provided to Medicaid recipients are medically necessary and appropriate. Services not specifically documented in the patient's medical records as having been rendered shall be deemed not to have been rendered and no coverage shall be provided.
- Hospice services are a medically directed, interdisciplinary program of palliative services for terminally ill people and their families, emphasizing pain and symptom control. following are core hospice services and must be provided directly by hospice employees.
 - Nursing Care: Nursing care must be provided by a registered nurse or by a licensed practical nurse under the supervision of a graduate of an approved school of professional nursing and who is licensed as a registered nurse.
 - Medical Social Services: 2. Medical social services must be provided by a social worker who has at least a bachelor's degree from a school accredited or approved by the Council on Social Work Education, and who is working under the direction of a physician.

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- 3. Physician Services: Physician services must be performed by a professional who is licensed to practice, who is acting within the scope of his or her license. The hospice medical director or the physician member of the interdisciplinary team must be a licensed doctor of medicine or osteopathy.
- Counseling Services: Counseling services must be provided to the terminally ill individual and the family members or other persons caring for the individual at home. Counseling, including dietary counseling, may be provided both for the purpose of training individual's family or other caregiver to provide care, and for the purpose of helping the individual and those caring for him or her to adjust to the individual's approaching death. Bereavement counseling consists of counseling services provided to individual's family up to one year after the individual's death. Bereavement counseling is a required hospice service, but it is not reimbursable.

These other services may be provided directly by the hospice or arranged by contractual agreement.

- 5. Short-term Inpatient Care: Short-term inpatient care may be provided in a participating hospice inpatient unit, or a participating hospital or nursing facility. General inpatient care may be required for procedures necessary for pain control or acute or chronic symptom management which cannot be provided in other settings. Inpatient care may also be furnished to provide respite for the individual's family or other persons caring for the individual at home.
- Durable Medical Equipment and Supplies: Durable medical equipment as well as other self-help and personal comfort items related to the palliation or management of the patient's terminal illness is covered. Medical supplies include those that are part of the written plan of care.

TN No. 94-12 Supersedes TN No. NEW

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Approval Date

JUL 0 1 1994 Effective Date ____

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- 7. **Drugs and Biologicals:** Only drugs which are used primarily for the relief of pain and symptom control related to the individual's terminal illness are covered.
- 8. Home Health Aide and Homemaker Services: Home health aides providing services to hospice recipients must meet the qualifications specified for home health aides by 4 CFR 484.36. Home health aides may provide personal care services. Aides may also perform household services to maintain a safe and sanitary environment in areas of the home used by the patient, such as changing the bed or light cleaning and laundering essential to the comfort and cleanliness of the patient. Homemaker services may include assistance in personal care, maintenance of a safe and healthy environment and services to enable the individual to carry out the plan of care. Home health aide and homemaker services must be provided under the general supervision of a registered nurse.
- 9. Rehabilitation Services: Rehabilitation services include physical and occupational therapies and speech-language pathology services that are used for purposes of symptom control or to enable the individual to maintain activities of daily living and basic functional skills.

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Transportation to include cost of ambulance, common carrier or other appropriate means; costs of outside meals and lodging enroute and during the treatment period; and the cost of an attendant when determined medically necessary except that no salary may be paid to a member of the family. Transportation costs are covered when the medical care and treatment is within the amount, duration and scope of the program and the resource is the nearest qualified to provide the necessary service.

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Standards established and methods to assure high quality care.

- Inpatient Hospital Services Facility must be licensed or formally approved by State standard setting authority and qualified to participate under title XVIII of the Social Security Act; or is determined currently to meet the requirements for such participation; and has in effect a hospital utilization review plan applicable to all title XIX patients.
- 2) Outpatient Hospital Services Facility must be licensed or formally approved by a State standard setting authority and qualified to participate under title XVIII of the Social Security Act, or is determined currently to meet the requirements for such participation.
- 3) Other Laboratory and Radiological Services
 - a) Independent laboratories must be qualified to participate under title XVIII of the Social Security Act or determined currently to meet the requirements for such participation.
 - b) Other laboratory and radiological facilities must meet standards established by State agency.
- 4) a) Skilled Nursing Facilities -

The SNF, or distinct part of a facility, must be qualified to participate under title XVIII of the Social Security Act, or is determined currently to meet the requirements for such participation.

b) Early and Periodic Screening Services

Provided according to standards established by the State agency.

c) Family Planning Services and Supplies

Provided according to standards established by the State agency.

- 5) Physicians' Services Provided within the scope of practice of his profession as defined by State law, by or under the personal supervision of an individual licensed under State law to practice medicine or osteopathy.
- 6) Medical care and any other type of remedial care recognized under State law, furnished by licensed practitioners with the scope of their practice as defined by State law.
 - a) Podiatrists' Services Provided within the scope of practice of his profession as defined by State law by

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- an individual licensed under State law to practice poliatry.
 - b) Optometrists' Services Provided within the scope of practice of his profession as defined by State law by an individual licensed under State law to practice optometry.
 - c) Chiropractors' Services Provided by an individual licensed under State law to practice chiropractic who meets the minimum standards for participation under title XVIII of the Social Security Act.
 - d) Other Practitioners' Services Provided by an individual licensed under State law to practice psychology within the scope of his practice as defined by State law.

7) Home Health Care Services -

- a) Intermittent or part-time nursing services furnished by a home health agency. Participating home health agencies must meet the standards for participation in title XVIII of the Social Security Act and be certified for such participation.
- b) Intermittent or part-time nursing services of a professional RN or LPN - Professional registered nurses must be currently licensed under State law.
- c) Medical supplies, equipment and appliances Providers of medical supplies, equipment and
 appliances must meet acceptable performance
 standards established by State agency in cooperation with Vocational Rehabilitation and
 Handicapped Children's Services Programs.
- 8) Private duty nursing services are provided by State licensed professional nurses.
- 9) Clinic Services -
- a) Mental health clinics must be licensed by the Department of Health.

 SA Approved 1/(2/8) the Department of Health.

proved 12/23/8/ Effective b) Other clinics participating in the program with the program agency.

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- 10) Dental services are provided by individuals who are licensed under State law to practice dentistry within the scope of practice as defined by State law.
- 11) Physical Therapy and Related Services
 - a) Physical therapy services are provided by individuals who are registered physical therapists, and are currently licensed by the State as prescribed by a physician.
 - c) Services for individuals with speech and hearing disorders are provided by or under the supervision of qualified speech pathologist or audiologist upon the referral of a physician.
- 12) a) Prescribed drugs are provided by licensed pharmacies on the written order of a physician, or other licensed practitioner within the scope of his professional practice as defined and limited by State and Federal law. In remote geographic areas, drugs may be provided by a licensed physician who maintains written orders and prescription files.
 - b) Dentures are provided as prescribed by a licensed dentist.
 - c) Prosthetic Devices are provided as prescribed by a physician by suppliers approved for participation in Vocational Rehabilitation and Handicapped Children's Services Programs.
 - d) Eyeglasses are provided as prescribed by a physician skilled in diseases of the eye or by an optometrist by such physicians or optometrists or by opticians recognized as qualified by the prescribing physician; whichever the patient may select.
- 15) Intermediate Care Facilities' Services are provided by facilities certified by the State survey agency meeting standards for participation as prescribed by the Secretary.
- Inpatient Psychiatric Facility Services for Individuals Under 22 are provided by facilities accredited by the Joint Commission on the Accreditation of Hospitals (JCAH) to provide inpatient psychiatric care.
- 17) a) Transportation services are furnished by common carriers regulated by the State or Federal government; ambulance suppliers must be approved for participation in title XVIII of the Social Security Act, and meet State agency program standards as certified by the Department of Health.

ST. May O SA Approved //14/82

RO Approved _______Effective _//1/82